

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1 CONTRACT ID CODE		PAGE OF PAGES	
				1 3	
2 AMENDMENT/MODIFICATION NO P00002		3 EFFECTIVE DATE See Block 16C		4 REQUISITION/PURCHASE REQ NO 192114FBO00004003.4	
6 ISSUED BY ICE/Detent Mngt/Detent Contracts-DC Immigration and Customs Enforcement Office of Acquisition Management 801 I Street NW, Suite 910 Washington DC 20536		7 ADMINISTERED BY (If other than Item 6) ICE/DM/DC-DC		5 PROJECT NO (If applicable)	
8 NAME AND ADDRESS OF CONTRACTOR (No, street, county, State and ZIP Code) SUFFOLK COUNTY OF ATTN SUFFOLK COUNTY OF DAN MARTINI CFO - FINANCIAL SERVIC 20 BRADSTON STREET BOSTON MA 021182705		(X) 9A AMENDMENT OF SOLICITATION NO		9B DATED (SEE ITEM 11)	
CODE 6180434340000 FACILITY CODE		X 10A MODIFICATION OF CONTRACT/ORDER NO ACD-3-H-0007 HSCEDM-14-F-IG018		10B DATED (SEE ITEM 13) 02/18/2014	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

☐ is extended, ☐ is not extended

12 ACCOUNTING AND APPROPRIATION DATA (If required)
See Schedule Net Increase: \$68,460.00

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO IN ITEM 10A.
	B THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF
	D OTHER (Specify type of modification and authority)
X	Unilateral Modification - In accordance with ACD-3-H-0007

E. IMPORTANT: Contractor ☒ is not, ☐ is required to sign this document and return 0 copies to the issuing office

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)

DUNS Number: 618043434
REQUISITION: 192114FBO00004003.4
Program Office: Amanda Raymond, 781-359-7520
Program Office COTR: Donald Granahan, 781-359-7530
Contract Specialist: Aubrey Acemyan, 202-732-2564
Contracting Officer: Gervonna Williams, 202-732-2583

The purpose of this modification is to:

- 1) Provide funding for CLIN 0001 in the amount of \$53,460.00; and
- 2) Provide funding for CLIN 0002 in the amount of \$15,000.00.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A NAME AND TITLE OF SIGNER (Type or print) Daniel F. Martini, CFO		16A NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Gervonna B. Williams	
15B CONTRACTOR/OFFEROR (Signature of person authorized to sign)		16B UNITED STATES OF AMERICA (Signature of Contracting Officer)	
15C DATE SIGNED 4/7/15		16C DATE SIGNED 4/9/14	

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
ACD-3-H-0007/HSCEDM-14-F-IG018/P00002PAGE OF
2 3NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The obligated funding on this order is estimated to cover performance through April 30, 2014.</p> <p>The total obligated amount for this task order is increased as follows: From: \$1,532,970.00 By: \$68,460.00 To: \$1,601,430.00</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted. Exempt Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 02/01/2014 to 04/30/2014</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p>				
0001	<p>Detention Bed Days Bed Day Rate: \$90.00</p> <p>The obligated funds are estimated to cover through April 30, 2014.</p> <p>The obligated funding for this CLIN is increased as follows: From: \$1,442,970.00 By: \$53,460.00 To: \$1,496,430.00</p> <p>The quantity of funded bed days is increased as follows: From: 16,033 By: 594 To: 16,627 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Continued ...</p>	16627	EA	90.00	1,496,430.00

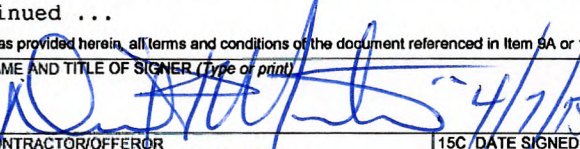

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
ACD-3-H-0007/HSCEDM-14-F-IG018/P00002

PAGE 3 OF 3

NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0002	<p>Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$53,460.00</p> <p>Change Item 0002 to read as follows (amount shown is the total amount):</p> <p>Processing Area Rent Rate: \$15,000.00 per month</p> <p>The obligated funds are to cover through April 30, 2014.</p> <p>The obligated funding for this CLIN is increased as follows: From: \$30,000.00 By: \$15,000.00 To: \$45,000.00</p> <p>The quantity of funded months of rent is increased as follows: From: 2 By: 1 To: 3 Product/Service Code: S216 Product/Service Description: HOUSEKEEPING- FACILITIES OPERATIONS SUPPORT</p> <p>Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$15,000.00</p>	3	EA	15,000.00	45,000.00

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1 CONTRACT ID CODE		PAGE OF PAGES 1 4	
2 AMENDMENT/MODIFICATION NO. P00001		3 EFFECTIVE DATE See Block 16C		4 REQUISITION/PURCHASE REQ NO See Schedule	
6 ISSUED BY ICE/Detent Mngt/Detent Contracts-DC Immigration and Customs Enforcement Office of Acquisition Management 801 I Street NW, Suite 910 Washington DC 20536		7 ADMINISTERED BY (If other than Item 6) CODE		5 PROJECT NO (If applicable)	
8 NAME AND ADDRESS OF CONTRACTOR (No, street, county, State and ZIP Code) SUFFOLK COUNTY OF ATTN SUFFOLK COUNTY OF DAN MARTINI CFO - FINANCIAL SERVICES 20 BRADSTON STREET BOSTON MA 021182705		(x) 9A. AMENDMENT OF SOLICITATION NO		9B. DATED (SEE ITEM 11)	
CODE 6180434340000 FACILITY CODE		X 10A. MODIFICATION OF CONTRACT/ORDER NO ACD-3-H-0007 HSCEDM-14-F-IG018 10B. DATED (SEE ITEM 13) 02/18/2014			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended, <input type="checkbox"/> is not extended Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified					
12. ACCOUNTING AND APPROPRIATION DATA (If required) See Schedule		Net Increase:		\$1,063,200.00	
13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
CHECK ONE					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A					
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:					
D. OTHER (Specify type of modification and authority) X Unilateral Modification - In accordance with ACD-3-H-0007					
E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ 0 copies to the issuing office					
14 DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible)					
DUNS Number: 618043434					
REQUISITION: 192114FBO00004003.3					
Program Office: Amanda Raymond, 781-359-7520					
Program Office COTR: Donald Granahan, 781-359-7530					
Contract Specialist: Aubrey Acemyan, 202-732-2564					
Contracting Officer: Gervonna Williams, 202-732-2583					
The purpose of this modification is to:					
1) Provide funding for CLIN 0001 in the amount of \$988,200.00;					
2) Provide funding for CLIN 0002 in the amount of \$15,000.00; and					
3) Establish and fund CLIN 0003 for Transportation in the amount of \$60,000.00.					
Continued ...					
Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect					
15A. NAME AND TITLE OF SIGNER (Type or print)  4/13/15		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Gervonna B. Williams			
15B. CONTRACTOR/OFFEROR Daniel F. Martini, CFO (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA  (Signature of Contracting Officer)	
				16C. DATE SIGNED 3/13/14	
NSN 7540-01-152-8070 Previous edition unusable					
STANDARD FORM 30 (REV 10-83) Prescribed by GSA FAR (48 CFR) 53.243					

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
ACD-3-H-0007/HSCEDM-14-F-IG018/P00001PAGE OF
2 4NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The obligated funding on this order is estimated to cover performance through April 30, 2014.</p> <p>The total obligated amount for this task order is increased as follows: From: \$469,770.00 By: \$1,063,200.00 To: \$1,532,970.00</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>Exempt Action: Y Discount Terms: Net 30 FOB: Destination Period of Performance: 02/01/2014 to 04/30/2014</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p>				
0001	<p>Detention Bed Days Bed Day Rate: \$90.00</p> <p>The obligated funds are estimated to cover through April 30, 2014.</p> <p>The obligated funding for this CLIN is increased as follows: From: \$454,770.00 By: \$988,200.00 To: \$1,442,970.00</p> <p>The quantity of funded bed days is increased as follows: From: 5,053 By: 10,980 To: 16,033 Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD Continued ...</p>	16033	EA	90.00	1,442,970.00

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
ACD-3-H-0007/HSCEDM-14-F-IG018/P00001PAGE OF
3 4NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	Requisition No: 192114FBO00004003, 192114FBO00004003.3 Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$988,200.00 Change Item 0002 to read as follows (amount shown is the total amount): 0002 Processing Area 2 EA 15,000.00 30,000.00 Rent Rate: \$15,000.00 per month The obligated funds are to cover through March 31, 2014. The obligated funding for this CLIN is increased as follows: From: \$15,000.00 By: \$15,000.00 To: \$30,000.00 The quantity of funded months of rent is increased as follows: From: 1 By: 1 To: 2 Product/Service Code: S216 Product/Service Description: HOUSEKEEPING- FACILITIES OPERATIONS SUPPORT Requisition No: 192114FBO00004003, 192114FBO00004003.3 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$15,000.00 Add Item 0003 as follows: 0003 TRANSPORTATION 60,000.00 Hourly Rate: \$25.00 Overtime Rate: \$37.50 Mileage: \$.36/mile The obligated funds are estimated to cover through April 30, 2014. Continued ...				

CONTINUATION SHEET

 REFERENCE NO. OF DOCUMENT BEING CONTINUED
 ACD-3-H-0007/HSCEDM-14-F-IG018/P00001

PAGE 4 OF 4

 NAME OF OFFEROR OR CONTRACTOR
 SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	The obligated funding for this CLIN is established as \$60,000.00. Product/Service Code: V222 Product/Service Description: TRANSPORTATION/TRAVEL/RELOCATION-TRAVEL/LODGING/RECRUITMENT: PASSENGER MOTOR CHARTER Requisition No: 192114FBO00004003.3 Accounting Info: RMD10LT-000 BA 32-23-00-000 18-61-0300-05-00-00-00 GE-21-31-00- ----- --- 000000 Funded: \$60,000.00				